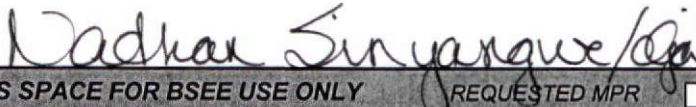


WELL POTENTIAL TEST REPORT (WPT)

1. <input checked="" type="checkbox"/> ORIGINAL <input type="checkbox"/> CORRECTION	4. LEASE NO. G27278	3. WELL NO. 003 (ST00BP00)	2. API NO. (with Completion Code) 60-817-41411-00-S01	11. OPERATOR NAME and ADDRESS (Submitting Office) Fieldwood Energy LLC 2000 W Sam Houston Pkwy South Suite 1200 Houston, Texas 77042	
8. FIELD NAME MC607	5. AREA NAME MC	6. BLOCK NO. 519	50. RESERVOIR NAME M55		
88. TYPE OF REQUEST <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> RECOMPLETION <input type="checkbox"/> REWORK <input type="checkbox"/> RECLASSIFICATION <input type="checkbox"/> REESTABLISH	89. ATTACHEMENTS PER 250.1151(a) and 250.1167 <input checked="" type="checkbox"/> LOG SECTION <input checked="" type="checkbox"/> RESERVOIR STRUCTURE MAP <input type="checkbox"/> OTHER		7. OPD NO. NH16-10	10. BSEE OPERATOR NO. 03295	43. DATE OF FIRST PRODUCTION 20210327
			9. UNIT NO. NA	90. RESERVOIR CLASSIFICATION <input type="checkbox"/> SENSITIVE <input checked="" type="checkbox"/> NONSENSITIVE	
WELL TEST					
92. DATE of TEST 20210505	93. PRODUCTION METHOD FL	94. TYPE OF WELL <input checked="" type="checkbox"/> OIL <input type="checkbox"/> GAS		95. HOURS TESTED 24	96. CHOKE SIZE (Test) 41
				97. PRETEST TIME 24	
98. CHOKE SIZE (Pretest) 41	99. SHUT-IN WELLHEAD PRESSURE (Gas wells only) NA		100. FLOWING TUBING PRESSURE 6310		101. STATIC BHP (Omit on Public Info. Copy) NA
102. LINE PRESSURE (Gas wells only) NA		103. TOP PERFORATED INTERVAL (md) 18680		104. BOTTOM PERFORATED INTERVAL (md) 18720	
TEST PRODUCTION - 24 HOUR RATES					
105. OIL (BOPD) 10211	106. GAS (MCFD) 7497	107. WATER (BWPD) 13	108. API @ 14.73 PSI & 60° F 33.1		109. SP GR GAS @ 14.73 PSI & 60° F 0.620
115. OTHER ACTIVE COMPLETIONS IN RESERVOIR (Continue in Remarks or attach an additional sheet if necessary.)					
LEASE NO.	WELL NAME	API WELL NO.	LEASE NO.	WELL NAME	API WELL NO.
1. G09821	003	60-817-41381-02-S01	5.		
2.			6.		
3.			7.		
4.			8.		
91. REQUESTED MAXIMUM PRODUCTION RATE (MPR) (Required only for Pacific and Alaska OCS Regions.)					
26. CONTACT NAME Debra J. Anderson		27. CONTACT TELEPHONE NO. 713-969-1340		32. CONTACT E-MAIL ADDRESS Debra.Anderson@fwellc.com	
28. AUTHORIZING OFFICIAL (Type or print name) Nathan Sinyangwe			29. TITLE Deepwater Production Engineer		
30. AUTHORIZING SIGNATURE 			31. DATE 20210524		
THIS SPACE FOR BSEE USE ONLY REQUESTED MPR <input type="checkbox"/> ACCEPTED <input type="checkbox"/> REJECTED (Pacific and Alaska OCS Regions)					
BSEE AUTHORIZING OFFICIAL			EFFECTIVE DATE		

WELL POTENTIAL TEST REPORT (WPT)

116. REMARKS

CERTIFICATION: I certify that the information submitted is complete and accurate to the best of my knowledge. I understand that making a false statement may subject me to criminal penalties of 18 U.S.C. 1001.

Name and Title: Debra J. Anderson / Technician Coordinator

Date: 20210524

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